

Epidemiology



Asthma in children is:

- Very common
- Often misdiagnosed
- Undertreated
- Associated with high urgent care usage
- Responsible for many sleepless nights
- The most common cause of school absences from chronic disease
- A common reason for parents (and caregivers) to miss work
- In most cases, an unnecessary reason to limit daily activities
- TREATABLE!

Epidemiology

Asthma is the most common chronic disorder in children and adolescents.

- About 5 million youngsters under 18 years of age have asthma.
⇒ This includes an estimated 1.3 million children under the age of 5 years.
- Each year, children with asthma miss more than 10 million school days (on average, more than 3 times the school absences of children without asthma).
- Children living in poverty and/or inner cities have higher rates of hospitalizations and mortality from their asthma.
- Children with asthma often limit activities unnecessarily.

For children with asthma, symptoms can interfere with:

- Sporting events
- School trips
- Physical education
- Play activities
- Playing brass or wind instruments

Children with well-controlled asthma can do these things quite well.

Do children who are wheezing and/or coughing function well?**Consider their:**

- Energy levels
- Concentration
- Attention
- Peer relations
- Physical activity
- Overall well-being

Uncontrolled asthma is expensive!

- Children use more medications when their asthma is out of control than when it is stable.
- Parents (and caregivers) lose time from work and regular activities.
- Disturbed sleep from nighttime asthma symptoms can decrease productivity at work for parents and at school for children.

Each year asthma in children accounts for:

- 3,028,000 doctor visits for children under age 15¹
- 570,000 emergency room visits for wheezing for children under age 15²
- 164,000 hospitalizations for children under age 15³
- Over 8.7 million prescriptions for children under age 17⁴

This translates into costs of billions of dollars each year.

¹National Ambulatory Medical Care Survey, 1993-95

²National Ambulatory Medical Care Survey, 1992-95

³National Hospital Discharge Survey, 1994

⁴National Medical Expenditure Survey, 1987

Expected outcomes of care for children with asthma should be high.

- Symptoms can be controlled.
- The disease can be controlled.
- Activity limitations are not necessary.

Care of our children with asthma can be improved. Most children with asthma can be managed by their primary care clinician.

Asthma is a leading cause of school absences.

- Respiratory symptoms account for 60% of school absences.
- It is not unusual to miss ≥ 10 school days/year due to asthma.
- Children with severe asthma may miss ≥ 30 days/year.

Time lost from school may negatively affect grades, academic achievement, self-esteem, and future life successes.

Source: Lenney. Ped Pulmonol 1997; S15:13

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